

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MM</i>	<i>70511</i>	<i>9BS</i>
O.I.P.E. CLASSIFIER	<i>PH</i>		<i>10/7</i>
FORMALITY REVIEW	<i>AS</i>	<i>545</i>	
RESPONSE FORMALITY REVIEW			<i>11-2-00</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral) ... Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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